STATE OF CALIFORNIA STD 618S (REV 6-94) (REVERSE) #MC

STD.	618S (REV. 6-94) (REVE	erse) FMC IN	DUSTRIAL DIS	ABILITY LEAVE	- B	ENEFIT OF	PTION COMPAR	ISON		
NA	ME			CBID	S	OCIAL SECURITY I	NO.	All computation Salary for:	ons based on	
PC	SITION NUMBER		SALARY RATE	RETIREMENT RATE		X FILING STATUS eral State	ADDITIONAL TAX		pay p	eriod
	1. REGULAR I	MONTHLY SALARY	//*INDUSTRIAL DIS	ABILITY LEAVE -	2	. INDUSTRIA	L DISABILITY LEAV	E - AFTER FIRST	Γ 22 WORKING D	ATES
FIRST 22 WORKING DATES					BASIC IDL					
GI	ROSS SALARY			\$	GROSS SALARY				\$	
	PERS/STRS			-	LESS 1/3 ADJUSTMENT				-	
FEDERAL INCOME TAX			-	GROSS IDL BEI		BENEFIT PAYMENT		\$		
LESS	SOCIAL SECU	CIAL SECURITY/MEDICARE			PERS/STRS RETIREMENT -			-		
STATE INCOME TAX			-	2/3 OF NET PAY				\$		
FULL NET PAY			\$	CODE ORGANIZATION		TION	AMOUNT			
	CODE	ORGAN	IZATION	AMOUNT						2
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TOTAL MISCELLANEOUS DEDUCTIONS -			-	3. IDL WITH SUPPLEMENTATION				Ψ		
RE					GROSS SUPPLEMENTATION PAY +					
	· ·			\$	0.	FEDERAL IN				
-		S S S S S S S S S S S S S S S S S S S			STATE INCC			_		
H	AVAILABLE LEAVE CREDITS				SOCIAL SECURITY/MEDICARE -					
SIC	K LEAVE	СТО	VACATION ANNUAL LEA		NI		ENTATION PAY		\$	
		PERSONAL HOLIDAY	PERSONAL LEAVE	OTHER				uo oolumn)		
НО	DLIDAY						IT PAY (from # 2 abo	,	\$	
<u> </u>							SCELLANEOUS DED	DUCTIONS	-	
-	HOURS OF CREDIT NEEDED FOR SUPPLEMENTATION IN A 21 22 (Check one) DAY PAY PERIOD ARE						/S BENEFIT PAY SPECIAL IDL CONDIT	TONE & DESTRIC	\$	
		(Circuit Gire)			• 1		s on Industrial Leave, if time			dered as
II F	NDICATED AB	: ALL CALCULATIO OVE. LEAVE CREI Y DEPENDING ON OD.	DITS NEEDED FOR	SUPPLEMENTAL	• [Deductions for Def Deductions for De supplementation (II to cover the deduction		ot be taken on the ban only be taken on nough money generat	asic Industrial disability industrial disability lea ed by the supplementa	ave with ation pay
F	Please indicate	e your benefit sele	ction in the space	below and return		Employees must ke other programs.	eep their personnel office info	ormed of any industrial	disability benefits recei	ived from
t	his letter to yo	ur Personnel Office	e within 15 calenda	ar days, or no later		El	MPLOYEE CERTIFIC	ATION AND SIG	NATURE	
	vill result in yo	u being placed on	IDL without suppl	thin 15 calendar days, or no later e to respond in the allowed time without supplementation. Without supplementation Without supplementation EMPLOYEE CERTIFICATION AND SIGNATURE I have received a copy of the Industrial Disability Leave Benefit Option Comparison (form STD. 618-S) and I understand that the election I made above regarding my choices related to IDL and IDL/S are subject to the restrictions outlined in this form.						
Г	_ □ Industrial	Disability Leave w	choices related to IDE and IDE's are subject to the restrictions outlined in the					. 101111.		
If you select IDL/S please indicate the level of supplementation					EMPLOYEE'S SIGNATURE			DATE SIGNED		
requested. Please be advised that the Personnel Office may be required to change this supplementation level because of changes in your monthly pay status and available leave credits.					PERSONNEL SPECIALIST'S SIGNATURE				DATE SIGNED	
	Full Suppl	ementation in the	amount indicated a	above.			onnel Office if you hav rn to Work Coordinat			
Partial Supplementation in the amount of hours.						disability benefits.				

INDUSTRIAL DISABILITY LEAVE WITH SUPPLEMENTATION BENEFITS INFORMATION AND OPTION SELECTION FORM

STD. 618S (REV. 6-94) (FRONT) FMC

EMPLOYEE NAME	DATE MAILED TO EMPLOYEE				
EFFECTIVE DATE	DATE OF INJURY				
EFFECTIVE DATE	DATE OF INJURY				
CBID	RESPONSE DUE DATE				
CEIE	REGISTRE DEL BATE				

It has been determined that you have been industrially injured and that you are eligible for an income continuation program.

You have a choice of receiving Industrial Disability Leave payments with or without supplementation of your available leave credits. Also, all medical treatment reasonably required to assist you will be paid in full.

Review this information carefully because the choice is an irrevocable one. The reverse side of this form provides you with detailed information based on your own salary, voluntary deductions and available leave credits.

You must sign the form and return it to your departmental personnel office within 15 days. Failure to respond will result in you being placed on Basic IDL without supplementation.

DESCRIPTION OF BENEFITS									
Question	Industrial Disability Leave	Industrial Disability Leave Using Available Leave Credits							
Is there a waiting period before benefits start?	Yes, three days. This is waived if you are hospitalized, disabled as a result of a criminal act of violence, or off more than 14 days.								
How much may I receive?	Amount varies and is limited to 52 weeks of payments within a two-year period beginning on the first day of disability. Your regular monthly net pay for 1st 22 working days*; 2/3 gross pay thereafter less voluntary deductions for up to an additional 11 months. NONE OF YOUR LEAVE CREDITS ARE USED. *For the first 22 working days on Industrial disability Leave, if time is lost for any part of a day, it shall be considered as a full date of disability and counted as one date towards the first 22 working days	For the first 22 dates of disability, you will receive your regular monthly net pay. Beginning on the 23rd date you may supplement the 2/3 gross pay with accrued leave credits in an amount necessary to approximate normal net pay. Once the level of supplementation is chosen it cannot be increased but maybe decreased on a prospective basis at your discretion.							
What leave credits may be used?	N/A	Sick leave, CTO-compensating time off, vacation o annual leave, or other leave credits such as persona leave.							
Instead of Industrial Disability Leave may I opt to supplement a workers' compensation payment such as temporary disability?	No. This option is no longer available to you as long as you are eligible to receive Industrial Disability Leave. Once IDL is exhausted you may supplement the workers' compensation payment with available leave credits.								
Does the State contribution for my health, dental and other insurance premiums continue?	State contribution continues.								
Do I continue to earn annual leave, vacation, and sick leave credits?	You continue to receive full credit.								
Do I continue to earn personal leave credit?	This depends on how much time is lost in any one pay period. If you are off the entire pay period on IDL with or without supplementation no reduction is made in your pay so no personal leave credit is earned.								
Do I continue to make my PERS/STRS contribution and earn full retirement credit?	Yes, you continue to make your full PERS/STRS contribution and you continue to earn full retirement credit.								
Will disability payments from other sources affect my IDL benefits?	Your benefits may be reduced if you receive Social Security disability payments. Any benefit that you pay for yourself will not be affected.								

In order to continue to receive IDL or IDL/S employees are required to participate in a vocational rehabilitation plan when offered by the State.

We recommend that you keep a copy of this notice. You can then refer to it if you need further information or any questions answered. The rules governing employees of the State University system may be slightly different from those described. If you are an employee of that system please check with your Personnel Department.